



Name

Account #: _____

Address

City

State

Zip

WV/SDR-2008
rtL185 v.3

REQUISITION FOR SOFT DRINK TAX STAMPS

COMPLETE SECTION 2 ON THE BACK OF THIS RETURN

SECTION 1 - TAX CALCULATION

1. Total (From Section 2 - Total Face Value)	. 00
2. Discount *	.
3. Amount Remitted (Line 1 minus Line 2)	.

- * **NO discount allowed on orders of less than \$25.00**
A discount of 5% on orders of \$25.00 and less than \$50.00
A discount of 10% on orders of \$50.00 or more

Address to Mail Stamps

Street Address (Physical Address Only - No Post Office Box Addresses)		
Street Address 2		
City	State	Zip Code

Sign Your Return

Under penalties of perjury, I declare that I have examined this return (including accompanying schedules and statements) and to the best of my knowledge and belief it is true and complete.

(Signature of Taxpayer) (Name of Taxpayer - Type or Print) (Title) (Date)

(Person to Contact Concerning this Return) (Telephone Number) (E-mail Address)

(Signature of preparer other than taxpayer) (Address) (Date)

YOU MUST RETAIN A COPY FOR YOUR RECORDS

MAIL TO: WEST VIRGINIA STATE TAX DEPARTMENT
Tax Account Administration Div
P.O. Box 2991, Charleston, WV 25330-2991
FOR ASSISTANCE CALL (304) 558-3333 TOLL FREE (800) 982-8297
For more information visit our web site at: www.tax.wv.gov
File online at <https://mytaxes.wvtax.gov>



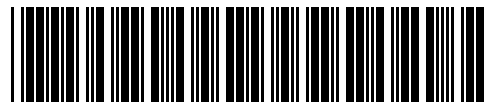
0 2 5 2 0 1 7 0 1 W

REQUISITION FOR SOFT DRINK TAX STAMPS

Account #: _____

* QUANTITY MUST BE ORDERED IN MULTIPLES OF 100

SECTION 2 - SOFT DRINK STAMPS			
Line	(Column 1) Denomination	(Column 2) Quantity *	(Column 3) Face Value of Stamps
1	1¢		. 00
2	2¢		. 00
3	4¢		. 00
4	10¢		. 00
5	15¢		. 00
6	20¢		. 00
7	24¢		. 00
8	32¢		. 00
9	36¢		. 00
10	38¢		. 00
11	40¢		. 00
12	48¢		. 00
13	60¢		. 00
14	80¢		. 00
15	\$2.00		. 00
16	\$4.00		. 00
Total Face Value (Report on Section 1 Line 1)			. 00



O 2 5 2 0 1 7 0 2 W